

BELL GARDENS POLICE DEPARTMENT

7100 SOUTH GARFIELD AVENUE BELL GARDENS, CA 90201 562-806-7600



EXPLORER POST #673 APPLICATION

APPLICANT DATA							
Last Name		First Name		Middle Name			
Street Address, City, Zip				Nickname/A	Alias	Sex	
Silver Address, Oity, Elp				Wickflame//	was	☐Male ☐Female	
Home Phone		Cell Phone		Email			
	T .						
Date of Birth	Age	Birth City and State		Driver's License/ID Card Num		e/ID Card Number	
Hair Color	Eye Color		Height		Weight		
Mother/Guardian's Name		Contact Number		Alternate Co	ontact Number		
Father/Guardian's Name		Contact Number		Alternate Co	ontact Number		
	SCH	OOL AND WC	RK INFORMAT	ION			
School Name/College				Grade		Cumulative GPA	
Employer				Employer Dh	ana Number		
Employer				Employer Phone Number			
Job Title		Hours per Week		Supervisor's Name			
			ENCES				
Last Name	Name First Name How Long Known		<mark>nown</mark>				
Street Address, City, State, Zip					Phone Number (□cell □home □work)		
Stroet Address, Sty, State, Ep							
Describe how you know this person							
Last Name		First Name		How Long Known			
					T =		
Street Address, City, State, Zip					Phone Number (□cell □home □work)		
Describe how you know this person							
Last Name		First Name		How Long K	<u>nown</u>		
Street Address, City, State, Zip					Phone Number (□cell □home □work)		
Describe how you know this person							

Have you ever committed any of the following acts?				
	No	Yes	# of times	
arson (intentionally starting a fire)				
burglary (entry of building or vehicle to commit a crime)				
robbery (theft using a weapon or force)				
petty theft (items valued under \$400)				
grand theft (items value over \$400)				
forgery				
vandalism				
possession of stolen property				
hit a boyfriend or girlfriend				
been involved in a fight				
If you answered "yes" to any of these, explain:				

Have you ever used or experimented with any of the following su	ıbstance	s, drugs	or
narcotics?		· ·	
	No	Yes	# of times
Alcohol			
Cigarettes/E-Cigarettes			
Marijuana			
Methamphetamine			
Ecstasy/Molly			
Nitrous Oxide			
Steroids			
Cocaine/Crack			
Heroin committing			
Any prescription medication not prescribed to you?			
Have you taken any other non-prescription drug not listed above?			
Have you ever sold drugs or narcotics?			
Have you ever supplied, manufactured, or possessed an illegal substance?			
If you answered "yes" to any of these, explain:			

PERSONAL CONDUCT QUESTIONAIRE CONTINUED			
Please answer the questions below regarding gangs.			
	No	Yes	Gang Name
Have you ever been a member of or affiliated with a gang?			
Has anyone in your family been a member of or affiliated with a gang?			
Have you ever associated with or known anyone that is a member of or			
affiliated with a gang?			
Have you ever attended a function where gang members or anyone			
affiliated with a gang was present?			
If you answered "yes" to any of these, explain:			

Are you willing and able to perform the following Explorer duties:			
	No	Yes	Unsure
Attend two explorer meetings per month?			
Serve 12 additional hours of community service per month to the Post,			
department functions, or other community activities?			
Attend the Explorer Academy every Saturday for approximately 16 weeks			
from approximately 7:00am-3:00pm?			
Participate in physical training?			
Participate in various types of law enforcement training?			
Maintain department grooming standards pertaining to dress, hairstyle,			
length of hair, etc.?			
If you answered "no" or "maybe" to any of these, explain:			

Wha	t do you think being a Police Expl	orer is all about? Explain.	
Wha	t do you expect to gain from bec	oming an Explorer? Explain.	
Wha	t personal strengths will you contri	bute to the Explorer Post?	
	Department. I acknowledge tha will be used solely for the Explorer	understand that a ect to examination by the Bell Gardens t all information contained in this appli- Post and for no other purpose. All of t dication is correct, to the best of my	Police cation
	Signature of Applicant	Date	
	Signature of Parent/Guardian if under 18	Date	